



11) PURPOSE OF TRIP, REMARKS & DETAILS (attach receipts/vouchers when required) All airfare paid by employee at her own private expense. 3: DFEH Administrative Regulations Hearing (p/u Chief Counsel & Assoc Dep Dir at airport) 3: Directors meeting - Agency 3: Senate Judiciary Committee - SB1252 (Corbett) 4: Meeting w/CA commission on Status of Women, ERA & ELC 6: Presentation at State Bar Fair Housing 23: Meeting - LA Apartment Association 6: DFEH District Office visit 28: Webinar presentation - CA Apartment Assoc (7.50 & 16.50) 9: Meeting - NCERT Steering Committee 4/20 Governor's Office - deliver award 15) I HEREBY CERTIFY That the above is a true statement of the travel expenses incurred by me in accordance with DPA rules in the service of the State of California. If a privately owned vehicle was used, and if mileage rates exceed the minimum rate, I certify that the cost of operating the vehicle was equal to or greater than the rate claimed, and that I have met the requirements as prescribed by SAM Sections 0750, 0751, 0752, 0753 and 0754 pertaining to vehicle safety and seat belt usage.		(12) NORMAL WORK HOURS 0800-1700 (13) PRIVATE VEHICLE LICENSE NBR. 6ATW241 (14) MILEAGE RATE CLAIMED .5 AGENCY ACCOUNTING OFFICE USE ONLY PAID BY REVOLVING FUND CHECK NBR.	
CLAIMANT'S SIGNATURE 	DATE 6/24/10	(16) SIGNATURE OF OFFICER APPROVING TRAVEL AND PAYMENT 	DATE 6/25/10
7.) SPECIAL EXPENSE AUTHORIZATION-SIGNATURE and TITLE (See Item 17 on reverse)			DATE